

State of Misconsin 2005 - 2006 LEGISLATURE

D-NOTE

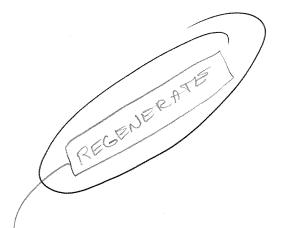
LRB-3240/№ P3

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PRELIMINARY DRAFT - NOT READY FOR INTRODUCTION

t-1727



AN ACT to repeal 15.07 (2) (b), 15.07 (3) (bm) 1., 15.107 (7), 15.195 (6), 15.195 (9), 16.03, 153.01 (2), 153.05 (14), 153.07, 153.45 (5), 153.45 (6), 153.67, 153.75 (1) (a), (b), (f), (h), (m), (n), (o), (p), (r), (t), and (u), 153.75 (2) and 153.76; to renumber 153.01 (1) and 153.22 (1); to renumber and amend 20.435 (4) (hg) and 20.435 (4) (hi); to amend 20.435 (1) (hg), 20.515 (1) (ut), 153.01 (5m), 153.05 (1) (a), 153.05 (1) (b), 153.05 (3) (a), 153.05 (5) (a), 153.05 (6m), 153.05 (6r), 153.05 (8) (a), 153.05 (9) (a), 153.05 (12) (a), 153.05 (13), 153.10 (1), 153.45 (1) (b) 11., 153.45 (1) (b) (intro.), 153.45 (1) (b) 9., 153.45 (1) (b) 10., 153.45 (1) (b) 11., 153.45 (1) (c) (intro.), 153.45 (1m), 153.45 (3), 153.50 (1) (b) 2. (intro.), 153.50 (3) (intro.), 153.50 (3) (a), 153.50 (4) (a) (intro.), 153.50 (4) (a) 1. a., 153.50 (4) (a) 1. b., 153.50 (4) (a) 2., 153.50 (4) (a) 3., 153.50 (4) (b), 153.50 (5) (a) (intro.), 153.50 (6) (c) (intro.), 153.50 (6) (d), 153.50 (6) (e) (intro.), 153.60 (title), 153.60 (1), 153.60 (1), 153.60 (1), 153.60 (1), 153.65 (1), 153.75 (1) (intro.), 153.75 (2) (intro.), 153.85, 153.90 (1) and

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153.90 (2); and to create 153.01 (1d), 153.01 (2g), 153.01 (3g), 153.05 (1) (c), 153.05 (2r), 153.05 (3) (c), 153.05 (5) (c), 153.05 (8) (c), 153.05 (9) (c), 153.05 (12) (c), 153.45 (intro.), 153.455, 153.50 (intro.), 153.50 (1) (b) 1m., 153.50 (4) (a) 1. c., 153.50 (4) (c) and 153.60 (intro.) of the statutes; relating to: requiring a contract with a data organization for the collection, analysis, and dissemination of health care claims information eliminating the board on health care information and the independent review board, and making appropriations.

Analysis by the Legislative Reference Bureau

This is a preliminary draft. An analysis will be provided for a subsequent version.

The people of the state of Wisconsin, represented in senate and assembly, do enact as follows:

SECTION 1. 15.07 (2) (b) of the statutes is repealed.

	9	SECTION 2. 15.07 (3) (bm) 1. of the statutes is repealed.
	10	SECTION 3. 15.107 (7) of the statutes is repealed.
	11	SECTION 4. 15.195 (6) of the statutes is repealed.
. /	12	SECTION 5. 15.195 (9) of the statutes is repealed.
1 MA	13 TEA 14	SECTION 6. 16.03 of the statutes is repealed. AL from P. 3, D. 3+0 10, 9000 HERE SECTION 7. 20.435 (1) (hg) of the statutes, as affected by 2005 Wisconsin Act
,	15	(this act), is amended to read:
	16	20.435 (1) (hg) General program operations; health care information. The
	17	amounts in the schedule to fund the activities of the department of health and family
	18	services and the board on health care information under ch. 153 and to contract with
	19	the data organization under s. 153.05 (2r). The contract fees paid under s. 153.05

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(6m) and assessments paid under s. 153.60 shall be credited to this appropriation

2 account.

7 SECTION 8. 20.435 (4) (hg) of the statutes is renumbered 20.435 (1) (hg) and

amended to read: 4

> 20.435 (1) (hg) General program operations; health care information. The amounts in the schedule to fund the activities of the department of health and family services and the board on health care information under ch. 153 and to contract with the data organization under s. 153.05 (2r). The contract fees paid under s. 153.05 (6m) and assessments paid under s. 153.60 shall be credited to this appropriation account.

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SECTION 9. 20.435 (4) (hi) of the statutes is represented 20.435 (Milli) land

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amended to read:

20.435 (1) (hi) Compilations and special reports; health care information. All moneys received from user fees imposed under s. 153.65 (1) for the purpose of financing the costs of the department of health and family services of producing special data compilations or special reports under s. 153.65 and to contract with the data organization under s. 153.05 (2r).

Section 10. 20.515 (1) (ut) of the statutes is amended to read:

20.515 (1) (ut) Health insurance data collection and analysis contracts. From the public employee trust fund, the amounts in the schedule for the costs of contracting for insurance data collection and analysis services under s. ss. 40.03 (6) (i) and 153.05 (2r).

SECTION 11. 153.01 (1) of the statutes is renumbered 153.01 (1g).

Section 12. 153.01 (1d) of the statutes is created to read:

153.01 (1d) "Administrator" has the meaning given in s. 633.01 (1).

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1	SECTION 13. 153.01 (2) of the statutes is repealed.
2	SECTION 14. 153.01 (2g) of the statutes is created to read:
3	153.01 (2g) "Calculated variable" means a data element that is computed or
4	derived from an original data item or derived using another data source.
5	SECTION 15. 153.01 (3g) of the statutes is created to read:
6	153.01 (3g) "Data organization" means a nonstock corporation organized
7	under ch. 181 that is described in section 501 (c) (3) of the Internal Revenue Code,
8	is exempt from federal income tax under section 501 (a) of the Internal Revenue
9	Code, and does all of the following:
10	(a) Represents health care consumers, insurers, administrators, and health
11	care providers.
12	(b) Is formed specifically to do all of the following:
13	1. Create a centralized claims repository for this state with credible and useful
14	data elements for the purposes of quality improvement, health care provider
15	performance comparisons, ready understandability, and consumer decision making.
16	2. Use the information it collects to develop and disseminate a unified public
17	report on health care quality, safety, and efficiency.
18	SECTION 16. 153.01 (5m) of the statutes is amended to read:
19	153.01 (5m) "Insurer" has the meaning given under s. $600.03 (27) 632.745 (15)$.
20	SECTION 17. 153.05 (1) (a) of the statutes is amended to read:
21	153.05 (1) (a) The Subject to s. 153.455, the department shall collect from
22	health care providers other than hospitals and ambulatory surgery centers, analyze,
23	and disseminate health care information, as adjusted for case mix and severity, in
24	language that is understandable to laypersons.
25	SECTION 18. 153.05 (1) (b) of the statutes is amended to read:

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153.05 (1) (b) The entity under contract under sub. (2m) (a) shall collect from hospitals and ambulatory surgery centers the health care information required of hospitals and ambulatory surgery centers by the department under ch. 153, 2001 stats., and the rules promulgated under ch. 153, 2001 stats., including, by the date that is 18 months after the date of the contract under sub. (2m) (a), outpatient hospital-based services. The entity shall analyze and disseminate that health care information, as adjusted for case mix and severity, in the manner required under this chapter, under ch. 153, 2001 stats., and, to the extent that the rules are consistent with this chapter, under the rules promulgated under ch. 153, 2001 stats., and in language that is understandable to laypersons.

SECTION 19. 153.05 (1) (c) of the statutes is created to read:

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153.05 (1) (c) Subject to s/153.455, the data organization under contract under

sub. (2r) shall collect from insurers that are not self-insurers and from administrators of insured plans and self-insured governmental plans, and may collect from self-insured nongovernmental plans, health care claims information other than information concerning services provided by hospitals and ambulatory surgery centers. The data organization shall analyze and publicly report the health care claims information with respect to the cost, quality, and effectiveness of health care, in language that is understandable by lay persons, and shall develop and maintain a centralized data repository. The data organization shall provide to the department, without charge, health care claims information collected by and reports produced by the data organization that the department requests. If s. 153.455 (4) applies, the department shall perform the duties specified

for the data organization under this paragraph.

Section 20. 153.05 (2r) of the statutes is created to read:

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and the same of th	D. +: 1 = 153 455(4) applies, visurers and Section 22
, except 7	hat if 3.153.455(4) applies, visurers and SECTION 22 administrators shall provide the health care claims information as required by the department
The same of the sa	
1	than information concerning services provided by hospitals and ambulatory surgery
2	conters, insurers that are not self insurers and administrators of insured plans and
3	self-insured governmental plans shall, and self-insurers and administrators of
4	self-insured nongovernmental plans may provide the health care claims
5	information to the data organization for use in preparing reports and developing and
<u>(6)</u>	maintaining a central data repository under this chapter.
7	SECTION 23. 153.05 (5) (a) of the statutes is amended to read:
8	153.05 (5) (a) Unless sub. (13) applies, subject to s. 153.455, the department
9	may require health care providers other than hospitals and ambulatory surgery
(10)	centers to submit to the department information specified by rule under s. 153.75 (1)
11	(n) for the preparation of reports, plans, and recommendations in the form specified
12	by the department by rule.
13	SECTION 24. 153.05 (5) (c) of the statutes is created to read:
14	153.05 (5) (c) Unless sub. (13) applies, subject to s. 153.455, the data
(15)	organization under contract under sub. (2r) shall require insurers that are not self
<u>(16)</u>	insurers and administrators of insured plans and self-insured governmental plans,
(17)	and shall request self insurers and administrators of self-insured nongovernmental
(18)	plans, to submit to the data organization health care claims information for the
19	preparation of reports, plans, and recommendations in the form specified by the data
20	organization. If s. 153.455 (4) applies, the department shall perform the duties
(21)	specified for the data organization under this paragraph.) The health care
$\boxed{22}$	SECTION 25. 155.05 (OIII) of the statutes is amended to read.
23	153.05 (6m) The department may contract with the group insurance board for
24	the provision of data collection and analysis services related to health maintenance
25	organizations and insurance companies that provide health insurance for state
	from insurers and administrators in the form specified.
	by the department.

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employees. The department shall establish contract fees for the provision of the services. All moneys collected under this subsection shall be credited to the appropriation under s. 20.435 (4) (1) (hg).

SECTION 26. 153.05 (6r) of the statutes is attracted to repealed.

153.05 (6r) The department shall study and, based on the results of the study, may develop and implement a voluntary system of health care plan reporting that enables purchasers and consumers to assess the performance of health care plans and the health care providers, other than hospitals and ambulatory surgery centers, that are employed or reimbursed by the health care plans. The department shall undertake the study and any development and implementation in cooperation with private health care purchasers, the board, the department of employee trust funds, the office of the commissioner of insurance, the interagency coordinating council created under s. 15.107 (7), major associations of health care providers, health care plans and consumers. If implemented, the department shall operate the system in a manner so as to enable purchasers, consumers, the public, the governor and, legislators, and the data organization under contract under sub. (2r) to assess the performance of health care plans and health care providers other than hospitals and ambulatory surgery centers.

SECTION 27. 153.05 (8) (a) of the statutes is amended to read:

153.05 (8) (a) Unless sub. (13) applies, <u>subject to s. 153.455</u>, the department shall collect, analyze and disseminate, in language that is understandable to laypersons, claims information and other health care information, as adjusted for case mix and severity, under the provisions of this chapter, as determined by rules promulgated by the department, from health care providers, other than hospitals and ambulatory surgery centers, specified by rules promulgated by the department.

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Data from those health care providers may be obtained through sampling techniques in lieu of collection of data on all patient encounters and data collection procedures shall minimize unnecessary duplication and administrative burdens. If the department collects from health care plans data that is specific to health care providers other than hospitals and ambulatory surgery centers, the department shall attempt to avoid collecting the same data from those health care providers.

Section 28. 153.05 (8) (c) of the statutes is created to read:

(1) to (3)

organization under contract under sub. (2r) shall collect, analyze, and publicly report, in language that is understandable to laypersons, health care claims information, other than information concerning services provided by hospitals or ambulatory surgery centers, as adjusted for case mix and severity, from insurers that are not self-insured and administrators of insured plans and self-insured governmental plans, and may collect, analyze and publicly report this information from self-insured and administrators of self-insured nongovernmental plans. Data from these sources may be obtained through sampling techniques in lieu of collection of data on all insureds, and data collection procedures shall minimize unnecessary duplication and administrative burdens. If s. 153.455 (4) applies, the department shall perform the duties specified for the data organization under this paragraph.

SECTION 29. 153.05 (9) (a) of the statutes is amended to read:

153.05 (9) (a) The Subject to s. 153.455, the department shall provide orientation and training to health care providers, other than hospitals and ambulatory surgery centers, who submit data under this chapter, to explain the process of data collection and analysis and the procedures for data verification, comment, interpretation, and release.

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SECTION 30. 153.05 (9) (c) of the statutes is created to read: (1) +o (3)

153.05 (9) (c) Subject to s. 153.455, the data organization under contract under sub. (2r) shall provide orientation and training to insurers that are not self-insurers, administrators of insured plans and self-insured governmental plans, self-insurers, and administrators of self-insured nongovernmental plans that submit data under this chapter, to explain the process of data collection and analysis and the procedures for data verification, comment, interpretation, and release. If s. 153.455 (4) applies, the department shall perform the duties specified for the data organization under this paragraph.

SECTION 31. 153.05 (12) (a) of the statutes is amended to read:

153.05 (12) (a) The Subject to s. 153.455, the department shall, to the extent possible and upon request, assist members of the public in interpreting data in health care information disseminated by the department.

SECTION 32. 153.05 (12) (c) of the statutes is created to read:

153.05 (12) (c) The data organization under contract under sub. (2r) shall, subject to s. 153.455, to the extent possible and upon request, assist members of the public in interpreting data in health care information disseminated by the data organization. If s. 153.455 (4) applies, the department shall perform the duties specified for the data organization under this paragraph.

SECTION 33. 153.05 (13) of the statutes is amended to read:

153.05 (13) The department may waive the requirement under sub. (1), (3) (c), (5), or (8) for a health care provider, who insurer that is not a self-insurer, administrator of a relf-insured plan or self-insured governmental plan, self-insurer, or administrator of a self-insured nongovernmental plan that requests the waiver and presents evidence to the department that the requirement under sub. (1), (3) (c), (5),

1	or (8) is burdensome, under standards established by the department by rule. The
2	department shall develop a form for use by a health care provider, insurer, or
3	administrator in submitting a request under this subsection.
4	SECTION 34. 153.05 (14) of the statutes, as created by 2005 Wisconsin Act
5	(Assembly Bill 100), is repealed.
6	SECTION 35. 153.07 of the statutes is repealed.
7	SECTION 36. 153.10 (1) of the statutes is amended to read:
8	153.10 (1) The Subject to s. 153.455, the department shall prepare, and submit
9	to the governor and the chief clerk of each house of the legislature for distribution
10	to the legislature under s. 13.172 (2), standard reports concerning health care
11	providers other than hospitals and ambulatory surgery centers that the department
12	prepares and shall collect information necessary for preparation of those reports. $\underline{\text{If}}$
13	s. 153.455 (4) applies, the department shall include in the reports under this
14	subsection reports concerning health care claims information the department
15	collects under s. 153.05.
16	SECTION 37. 153.22 (1) of the statutes is renumbered 153.22.
17	SECTION 38. 153.45 (intro.) of the statutes is created to read:
18	153.45 (intro.) Subject to s. 153.455:
19	SECTION 39. 153.45 (1) (intro.) of the statutes is amended to read:
20	153.45 (1) (intro.) After completion of data verification, comment and review
21	procedures specified by the department by rule, the department shall release data,
22	together with comments, if any, in the following forms:
23	Section 40. 153.45 (1) (b) (intro.) of the statutes is amended to read:
24	153.45 (1) (b) (intro.) For information that is submitted by health care
25	providers other than hospitals or ambulatory surgery centers, public use data files

that do not permit the identification of specific patients, employers, or health care providers, as defined by rules promulgated by the department. The identification of patients, employers, or health care providers shall be protected by all necessary means, including the deletion of patient identifiers; the use of calculated variables and aggregated variables; the specification of counties as to residence, rather than zip codes; the use of 5-year categories for age, rather than exact age; not releasing information concerning a patient's race, ethnicity, or dates of admission, discharge, procedures, or visits; and masking sensitive diagnoses and procedures by use of larger diagnostic and procedure categories. Public use data files under this paragraph may include only the following:

SECTION 41. 153.45 (1) (b) 9. of the statutes is amended to read:

153.45 (1) (b) 9. Information that contains the name of a health care provider that is not a hospital or ambulatory surgery center, if the independent review board department first reviews and approves the release or if the department promulgates rules that specify circumstances under which the independent review board need not review and approve the release.

Section 42. 153.45 (1) (b) 10. of the statutes is amended to read:

153.45 (1) (b) 10. Calendar quarters of service, except if the department specifies by rule that the number of data elements included in the public use data file is too small to enable protection of patient confidentiality.

SECTION 43. 153.45 (1) (b) 11. of the statutes is amended to read:

153.45 (1) (b) 11. Information other than patient-identifiable data, as defined in s. 153.50 (1) (b), as approved by the independent review board department.

SECTION 44. 153.45 (1) (c) (intro.) of the statutes is amended to read:

153.45 (1) (c) (intro.) Custom-designed reports containing portions of the data
under par. (b). Of information submitted by health care providers that are not
hospitals or ambulatory surgery centers, requests under this paragraph for data
elements other than those available for public use data files under par. (b), including
the patient's month and year of birth, require review and approval by the
independent review board before the data elements may be released. Information
that contains the name of a health care provider that is not a hospital or ambulatory
surgery center may be released only if the independent review board department
first reviews and approves the release or if the department promulgates rules that
specify circumstances under which the independent review board need not review
and approve the release. Reports under this paragraph may include the patient's zip
code only if at least one of the following applies:

SECTION 45. 153.45 (1m) of the statutes is amended to read:

153.45 (1m) After completion of data verification and review procedures specified by the department by rule, the department may, but is not required to, release special data compilations.

Section 46. 153.45 (3) of the statutes is amended to read:

153.45 (3) The department may, but is not required to, release health care provider–specific and employer–specific data that relates to health care providers other than hospitals and ambulatory surgery centers, except in public use data files as specified under sub. (1) (b), in a manner that is specified in rules promulgated by the department.

SECTION 47. 153.45 (5) of the statutes is repealed.

SECTION 48. 153.45 (6) of the statutes is repealed.

Section 49. 153.455 of the statutes is created to read:

153.50 (1) (b) 1m. "Patient-identifiable data does not include calculated
variables that are derived from patient-identifiable data and the dissemination of
which does not permit patient identification.
SECTION 52. 153.50 (1) (b) 2. (intro.) of the statutes is amended to read:
153.50 (1) (b) 2. (intro.) "Patient-identifiable data", for information submitted
by health care providers who are not hospitals or ambulatory surgery centers and by
insurers and administrators, means all of the following data elements:
SECTION 53. 153.50 (3) (intro.) of the statutes is amended to read:
153.50 (3) Measures to ensure protection of patient identity. (intro.) To
ensure that the identity of patients is protected when information obtained by the
department or, by the entity under contract under s. 153.05 (2m) (a), or by the data
organization under contract under s. 153.05 (2r) is disseminated, the department
and, the entity, and the data organization shall do all of the following:
SECTION 54. 153.50 (3) (a) of the statutes is amended to read:
153.50 (3) (a) Aggregate any data element category containing small numbers.
The department, in so doing, shall use procedures that are developed by the
department and approved by the board and that follow commonly accepted
statistical methodology.
Section 55. 153.50 (3) (b) (intro.) of the statutes is amended to read:
153.50 (3) (b) (intro.) Remove and destroy all of the following data elements on
the uniform patient billing forms that are received by the department or by, the
entity, or the data organization under the requirements of this chapter:
Section 56. 153.50 (3) (d) of the statutes is amended to read:

153.50	(3) (d) Require that a purchaser of data under this chapter sign and have
notarized th	e data use agreement of the department or of, the entity specified in par.
(e), or the da	ata organization, as applicable.
SECTIO	on 57. 153.50 (3m) of the statutes is amended to read:
153.50	(3m) HEALTH CARE PROVIDER PROVIDER, ADMINISTRATOR, OR INSURER
MEASURES TO	ENSURE PATIENT IDENTITY PROTECTION. A health care provider that is not
a hospital o	r ambulatory surgery center or an insurer or an administrator shall,
before subn	mitting information required by the department, or by the data
organization	n under contract under s. 153.05 (2r), under this chapter, convert to a
payer categ	ory code as specified by the department or the data organization, as
applicable, a	any names of an insured's payer or other insured's payer.
SECTIO	on 58. 153.50 (4) (a) (intro.) of the statutes is amended to read:
153.50	(4) (a) (intro.) Except as specified in par. pars. (b) and (c), under the
procedures s	specified in sub. (5), release of patient-identifiable data may be made
only to any	of the following:
SECTIO	on 59. 153.50 (4) (a) 1. a. of the statutes is amended to read:
153.50	(4) (a) 1. a. An agent of the department who is responsible for the
patient-ider	ntifiable data in the department, in order to store the data and ensure the
accuracy of	the information in the database of the department or to create a
calculated v	ariable that is derived from the patient-identifiable data.
Sectio	on 60. 153.50 (4) (a) 1. b. of the statutes is amended to read:
153.50	(4) (a) 1. b. An agent of the entity under contract under s. 153.05 (2m)

(a) who is responsible for the patient-identifiable data of the entity, in order to store

the data and ensure the accuracy of the information in the database of the entity or

to create a calculated variable that is derived from the patient-identifiable data.

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1	SECTION 61. 153.50 (4) (a) 1. c. of the statutes is created to read:
2	153.50 (4) (a) 1. c. An agent of the data organization under contract under s.
3	153.05 (2r) who is responsible for the patient-identifiable data of the data
4	organization, in order to store the data and ensure the accuracy of the information
5	in the database of the data organization or to create a calculated variable that is
6	derived from the patient-identifiable data.
7	SECTION 62. 153.50 (4) (a) 2. of the statutes is amended to read:
8	153.50 (4) (a) 2. A health care provider that is not a hospital or ambulatory
9	surgery center or the agent of such a health care provider, to ensure the accuracy of
10	the information in the database of the department or the data organization under
11	contract under s. 153.05 (2r), or a health care provider that is a hospital or
12	ambulatory surgery center or the agent of such a health care provider, to ensure the
13	accuracy of the information in the database of the entity under contract under s
14	153.05 (2m) (a).
15	SECTION 63. 153.50 (4) (a) 3. of the statutes is amended to read:
16	153.50 (4) (a) 3. The department, for purposes of epidemiological investigation
17	or, with respect to information from health care providers that are not hospitals or
18	ambulatory surgery centers, the department or the data organization under contract

SECTION 64. 153.50 (4) (b) of the statutes is amended to read:

under s. 153.05 (2r), to eliminate the need for duplicative databases.

153.50 (4) (b) Of information submitted by health care providers that are not hospitals or ambulatory surgery centers, patient–identifiable data that contain a patient's date of birth may be released under par. (a) only under circumstances as specified by rule by the department.

Section 65. 153.50 (4) (c) of the statutes is created to read:

share health care claims data collected by the data organization if the sharing is in compliance with 42 USC 1320d-2 and 1320d-4 and 45 CFR 164. SECTION 66. 153.50 (5) (a) (intro.) of the statutes is amended to read: 153.50 (5) (a) (intro.) The department or, an entity that is under contract under s. 153.05 (2m) (a), or a data organization that is under contract under s. 153.05 (2m) may not release or provide access to patient-identifiable data to a person authorized under sub. (4) (a) unless the authorized person requests the department or, entity, or data organization, in writing, to release the patient-identifiable data. The request shall include all of the following: SECTION 67. 153.50 (5) (b) (intro.) of the statutes is amended to read: 153.50 (5) (b) (intro.) Upon receipt of a request under par. (a), the department or, entity under contract under s. 153.05 (2m) (a), or data organization, whichever is appropriate applicable, shall, as soon as practicable, comply with the request or notify the requester, in writing, of all of the following: SECTION 68. 153.50 (5) (b) 1. Of the statutes is amended to read: 153.50 (5) (b) 1. That the department or, entity, or data organization, as applicable, is denying the request in whole or in part. SECTION 69. 153.50 (6) (a) of the statutes is amended to read: 153.50 (6) (a) The department or, entity under contract under s. 153.05 (2m) (a), or data organization under contract under s. 153.05 (2r) may not require a health care provider submitting health care information under this chapter to include the patient's name, street address or social security number.	153.50 (4) (c) The data organization under contract under s. 153.05 (2r) may
Section 66. 153.50 (5) (a) (intro.) of the statutes is amended to read: 153.50 (5) (a) (intro.) The department or, an entity that is under contract under s. 153.05 (2m) (a), or a data organization that is under contract under s. 153.05 (2r) may not release or provide access to patient—identifiable data to a person authorized under sub. (4) (a) unless the authorized person requests the department or, entity, or data organization, in writing, to release the patient—identifiable data. The request shall include all of the following: Section 67. 153.50 (5) (b) (intro.) of the statutes is amended to read: 153.50 (5) (b) (intro.) Upon receipt of a request under par. (a), the department or, entity under contract under s. 153.05 (2m) (a), or data organization, whichever is appropriate applicable, shall, as soon as practicable, comply with the request or notify the requester, in writing, of all of the following: Section 68. 153.50 (5) (b) 1. of the statutes is amended to read: 153.50 (5) (b) 1. That the department or, entity, or data organization, as applicable, is denying the request in whole or in part. Section 69. 153.50 (6) (a) of the statutes is amended to read: 153.50 (6) (a) The department or, entity under contract under s. 153.05 (2m) (a), or data organization under contract under s. 153.05 (2r) may not require a health care provider submitting health care information under this chapter to include the	share health care claims data collected by the data organization if the sharing is in
153.50 (5) (a) (intro.) The department or, an entity that is under contract under s. 153.05 (2m) (a), or a data organization that is under contract under s. 153.05 (2r) may not release or provide access to patient—identifiable data to a person authorized under sub. (4) (a) unless the authorized person requests the department or, entity, or data organization, in writing, to release the patient—identifiable data. The request shall include all of the following: Section 67. 153.50 (5) (b) (intro.) of the statutes is amended to read: 153.50 (5) (b) (intro.) Upon receipt of a request under par. (a), the department or, entity under-contract under s. 153.05 (2m) (a), or data organization, whichever is appropriate applicable, shall, as soon as practicable, comply with the request or notify the requester, in writing, of all of the following: Section 68. 153.50 (5) (b) 1. of the statutes is amended to read: 153.50 (5) (b) 1. That the department or, entity, or data organization, as applicable, is denying the request in whole or in part. Section 69. 153.50 (6) (a) of the statutes is amended to read: 153.50 (6) (a) The department or, entity under contract under s. 153.05 (2m) (a), or data organization under contract under s. 153.05 (2r) may not require a health care provider submitting health care information under this chapter to include the	compliance with 42 USC 1320d-2 and 1320d-4 and 45 CFR 164.
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153.50 (6) (a) The department or, entity under contract under s. 153.05 (2m) (a), or data organization under contract under s. 153.05 (2r) may not require a health care provider submitting health care information under this chapter to include the	applicable, is denying the request in whole or in part.
(a), or data organization under contract under s. 153.05 (2r) may not require a health care provider submitting health care information under this chapter to include the	SECTION 69. 153.50 (6) (a) of the statutes is amended to read:
care provider submitting health care information under this chapter to include the	153.50 (6) (a) The department or, entity under contract under s. 153.05 (2m)
	(a), or data organization under contract under s. 153.05 (2r) may not require a health
patient's name, street address or social security number.	care provider submitting health care information under this chapter to include the
	patient's name, street address or social security number.

Section 70. 153.50 (6) (b) of the statutes is amended to read:

153.50 (6) (b) The department or data organization under contract under s.
153.05 (2r) may not require under this chapter a health care provider that is not a
hospital or ambulatory surgery center or an insurer or administrator from which
health care claims information is collected under s. 153.05 to submit uniform patient
billing forms.
SECTION 71. 153.50 (6) (c) (intro.) of the statutes is amended to read:
153.50 (6) (c) (intro.) A health care provider that is not a hospital or ambulatory
surgery center and an insurer or administrator from which health care claims
information is collected under s. 153.05 may not submit any of the following to the
department or to the data organization under contract under s. 153.05 (2r) under the
requirements of this chapter:
SECTION 72. 153.50 (6) (d) of the statutes is amended to read:
153.50 (6) (d) If a health care provider that is not a hospital or ambulatory
surgery center or an insurer or administrator from which health care claims
information is collected under s. 153.05 submits a data element that is specified in
par. (c) 1. to 10., the department or the data organization under contract under s.
153.05 (2r) shall immediately return this information to the health care provider,
insurer, or administrator or, if discovered later, shall remove and destroy the
information.
SECTION 73. 153.50 (6) (e) (intro.) of the statutes is amended to read:
153.50 (6) (e) (intro.) A health care provider, or an insurer or administrator
from which health care claims information is collected under s. 153.05, may not
submit information that uses any of the following as a patient account number:

SECTION 74. 153.60 (title) of the statutes is amended to read:

153.60 (title) Assessments to fund operations of department and board.

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SECTION 75. 153.60 (intro.) of the statutes is created to read:

153.60 (intro.) Subject to s. 153.455:

, as affected by 2005 Wis consur

SECTION 76. 153.60 (1) of the statutes is amended to read:

The department shall, by the first October 1 after the 153.60 **(1)** commencement of each fiscal year, estimate the total amount of expenditures under this chapter for the department and the board for that fiscal year for data collection, database development and maintenance, generation of data files and standard reports, orientation and training provided under s. 153.05 (9) (a) and, maintaining the board, and contracting with the data organization under s. 153.05 (2r). The department shall assess the estimated total amount for that fiscal year, less the estimated total amount to be received for purposes of administration of this chapter under s. 20.435 (1) (hi) during the fiscal year and the unencumbered balance of the amount received for purposes of administration of this chapter under s. 20.435 (1) (hi) from the prior fiscal year and the amount in the appropriation account under s. 20435 (1) (dg), 1997 stats, for the fiscal year, to health care providers, other than hospitals and ambulatory surgery centers, who are in a class of health care providers from whom the department collects data under this chapter in a manner specified by the department by rule. The department shall obtain approval from the board for the amounts of assessments for health care providers other than hospitals and ambulatory surgery centers. The department shall work together with the department of regulation and licensing to develop a mechanism for collecting assessments from health care providers other than hospitals and ambulatory surgery centers. No health care provider that is not a facility may be assessed under this subsection an amount that exceeds \$75 per fiscal year. All payments of assessments shall be credited to the appropriation under s. 20.435 (1) (hg).

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SECTION 77. 153.60 (1) of the statutes, as affected by 2005 Wisconsin Act (this act), section 76, is amended to read:

The department shall, by the first October 1 after the 153.60 (1) commencement of each fiscal year, estimate the total amount of expenditures under this chapter for the department and the board for that fiscal year for data collection, database development and maintenance, generation of data files and standard reports, orientation and training provided under s. 153.05 (9) (a), maintaining the board, and contracting with the data organization under s. 153.05 (2r). department shall assess the estimated total amount for that fiscal year, less the estimated total amount to be received for purposes of administration of this chapter under s. 20.435 (1) (hi) during the fiscal year and the unencumbered balance of the amount received for purposes of administration of this chapter under s. 20.435 (1) (hi) from the prior fiscal year, to health care providers, other than hospitals and ambulatory surgery centers, who are in a class of health care providers from whom the department collects data under this chapter in a manner specified by the department by rule. The department shall obtain approval from the board for the amounts of assessments for health care providers other than hospitals and The department shall work together with the ambulatory surgery centers. department of regulation and licensing to develop a mechanism for collecting assessments from health care providers other than hospitals and ambulatory surgery centers. No health care provider that is not a facility may be assessed under this subsection an amount that exceeds \$75 per fiscal year. All payments of assessments shall be credited to the appropriation under s. 20.435 (1) (hg).

SECTION 78. 153.60 (1) of the statutes, as affected by 2005 Wisconsin Act (this act), section 77, is amended to read:

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The department shall, by the first October 1 after the 153.60 (1) commencement of each fiscal year, estimate the total amount of expenditures under this chapter for the department for that fiscal year for data collection, database development and maintenance, generation of data files and standard reports, orientation and training provided under s. 153.05 (9) (a) and contracting with the data organization under s. 153.05 (2r). The department shall assess the estimated total amount for that fiscal year less the estimated total amount to be received for purposes of administration of this chapter under s. 20.435 (1) (hi) during the fiscal year and the unencumbered balance of the amount received for purposes of administration of this chapter under s. 20.435 (1) (hi) from the prior fiscal year, to health care providers, other than hospitals and ambulatory surgery centers, who are in a class of health care providers from whom the department collects data under this chapter in a manner specified by the department by rule. The department shall work together with the department of regulation and licensing to develop a mechanism for collecting assessments from health care providers other than hospitals and ambulatory surgery centers. No health care provider that is not a facility may be assessed under this subsection an amount that exceeds \$75 per fiscal year. All payments of assessments shall be credited to the appropriation under s. 20.435 (1) Jas affected by 2005 Wisconsus (hg).

SECTION 79. 153.60 (3) of the statutes is an ended to read vepealed.

153.60 (3) The department shall, by the first October 1 after the commencement of each fiscal year, estimate the total amount of expenditures required for the collection, database development and maintenance and generation of public data files and standard reports for health care plans that voluntarily agree to supply health care data under s. 153.05 (6r). The department shall assess the

1	estimated total amount for that fiscal year to health care plans in a manner specified
2	by the department by rule and may enter into an agreement with the office of the
3	commissioner of insurance for collection of the assessments. Each health plan that
4	voluntarily agrees to supply this information shall pay the assessments on or before
5	December 1. All payments of assessments shall be deposited in the appropriation
6	under s. $20.435(4)(1)$ (hg) and may be used solely for the purposes of s. 153.05 (6r).
7	SECTION 80. 153.65 (1) of the statutes is amended to read: , as affected by wiscousin
8	153.65 (1) The Subject to s. 153.455, the department may, but is not required
9	to, provide, upon request from a person, a data compilation or a special report based
10	on the information collected by the department. The department shall establish user
11	fees for the provision of these compilations or reports, payable by the requester,
12	which shall be sufficient to fund the actual necessary and direct cost of the
13	compilation or report. All moneys collected under this subsection shall be credited
14	to the appropriation under s. 20.435 (1) (hi).
15	SECTION 81. 153.67 of the statutes is repealed.
16	Section 82. 153.75 (1) (intro.) of the statutes is amended to read:
17	153.75 (1) (intro.) Following approval by the board, the <u>The</u> department shall
18	promulgate the following rules:
19	SECTION 83. 153.75 (1) (a), (b), (f), (h), (m), (n), (o), (p), (r), (t), and (u) of the
20	statutes are repealed.
21	SECTION 84. 153.75 (2) (intro.) of the statutes is amended to read:
22	153.75 (2) (intro.) Following approval by the board, the The department may
23	promulgate all of the following rules: SECTION # . RP; 153.75 (2)(d)
24	SECTION 85. 153.75 (2) of the statutes, as affected by 2005 Wisconsin Act
25	(this act), is repealed.

SECTION 86

January

1	SECTION 86. 153.76 of the statutes is repealed.
2	SECTION 87. 153.85 of the statutes is amended to read:
3	153.85 Civil liability. Except as provided in s. 153.86, any person violating
4	s. 153.50 or rules promulgated under s. 153.75 (1) (a) is liable to the patient for actual
5	damages and costs, plus exemplary damages of up to \$1,000 for a negligent violation
6	and up to \$5,000 for an intentional violation.
7	SECTION 88. 153.90 (1) of the statutes is amended to read:
8	153.90 (1) Whoever intentionally violates s. 153.45 (5) or 153.50 or rules
9	promulgated under s. 153.75 (1) (a) may be fined not more than \$15,000 or
10	imprisoned for not more than one year in the county jail or both.
11	SECTION 89. 153.90 (2) of the statutes is amended to read:
12	153.90 (2) Any person who violates this chapter or any rule promulgated under
13	the authority of this chapter, except ss. 153.45 (5), s. 153.50 and 153.75 (1) (a), as
14	provided in s. 153.85 and sub. (1), shall forfeit not more than \$100 for each violation.
15	Each day of violation constitutes a separate offense, except that no day in the period
16	between the date on which a request for a hearing is filed under s. 227.44 and the date
17	of the conclusion of all administrative and judicial proceedings arising out of a
18	decision under this section constitutes a violation.
19	SECTION 90. Effective dates. This act takes effect on the day after publication,
20	except as follows: (by SECTION) (AUTO REFX)
21	(1) Elimination of Board on Health Care Information. The treatment of
22	sections 15.07 (2) (b) and (3) (bm) 1., 15.195 (6), 20.435 (1) (hg), 153.01 (2), 153.05 (6n),
23	153.07, 153.50 (3) (a), 153.60 (title), 153.60 (1) (by Section 77), 153.75 (1) (intro.) and
24	(2) (intro.), and 153.76 of the statutes takes effect on 161, 2007.

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- (2) ELIMINATION OF INDEPENDENT REVIEW BOARD. The treatment of sections 15.195 (9), 153.45 (1) (b) 9. and 11. and (c) (intro.), 153.45 (6), and 153.67 of the statutes takes effect on 1, 2007.
- (3) Health care information; departmental powers; rule making. The treatment of sections 153.05 (1) (a), (5) (a), and (8) (a), 153.45 (1) (intro.) and (b) (intro.) and 10., (1m), (3), and (5), 153.50 (4) (a) (intro.), (b), and (c), 153.60 (1) (by Section 78), 153.65 (1), 153.85, and 153.90 (1) and (2) of the statutes and the repeal of section 153.75 (1) (a), (b), (f), (h), (m), (n), (o), (p), (r), (t), and (u) and (2) of the statutes take effect on the date specified in s. 153.455 (1) of the statutes, as created by this act.
- (4) ELIMINATION OF INTERAGENCY COORDINATING COUNCIL. The treatment of sections 15.107 (7), 16.03, and 153705 (6) of the statutes takes effect on July 1, 2007.

(END)

and

D-NOTE

DRAFTER'S NOTE FROM THE LEGISLATIVE REFERENCE BUREAU

LRB-3240/P2dn P3
DAK:cs:ps

July 14, 2005

To Representative Underheim:

- 1. I assumed that s. 153.50 (3m), stats., is applicable to the data organization and affected it; is that assumption correct?
- 2. Please note that I also added the "calculated variable" language requested by the Wisconsin Hospitals Association for s. 153.50 (4) (a) 1. b., stats., to s. 153.50 (4) (a) 1. a. and c., for use by DHFS or the data organization. Okay?
- 3. Should insurers be added to s. 153.50 (4) (a) 2., stats., to allow them to check accuracy?
- 4. Should s. 153.50 (4) (b), stats., as affected by this draft, be expanded to cover insurers and administrators? Would doing so pose a problem for the data organization? If so, how would you like for me to modify it?
- 5. Are s. 153.50 (6) (b) and (e) (intro.), stats., amended as you wish?
- 6. My conversation with Susan Wood of DHFS on July 11 clarified that DHFS feels that, if the contract with the data organization ends because of dissatisfaction (and another contract is not made with another organization), DHFS should be required to do what is required under current law (i.e., collect health care information from health care providers other than hospitals and ambulatory surgery centers), plus what is required of the data organization under s. 153.05 (1) (c). This instruction has governed my amendments to numerous provisions. Please especially review s. 153.455 (3) and (4), as changed in this draft.

7. Is any provision necessary to clarify who owns the data collected by the data organization?

8 When this draft is redrafted in introducible form, I will update the provisions that have been affected by 2005 Assembly Bill 100.

INSERT D-NOTE

Debora A. Kennedy Managing Attorney Phone: (608) 266–0137

E-mail: debora.kennedy@legis.state.wi.us

DRAFTER'S NOTE FROM THE LEGISLATIVE REFERENCE BUREAU

September 12, 2005

To Representative Underheim:

- 1. I assumed that s. 153.50 (3m), stats., is applicable to the data organization and affected it; is that assumption correct?
- 2. Please note that I also added the "calculated variable" language requested by the Wisconsin Hospitals Association for s. $153.50\,(4)\,(a)\,1$. b., stats., to s. $153.50\,(4)\,(a)\,1$. a. and c., for use by DHFS or the data organization. Okay?
- 3. Should insurers be added to s. 153.50 (4) (a) 2., stats., to allow them to check accuracy?
- 4. Should s. 153.50 (4) (b), stats., as affected by this draft, be expanded to cover insurers and administrators? Would doing so pose a problem for the data organization? If so, how would you like for me to modify it?
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- 7. I understand that the contract for the date organization is anticipated to be around January 1, 2007; if that is done, the appropriation expenditures under ss. 20.435 (1) (hg) and (hi) and 20.515 (1) (ut), stats., authorized under this bill will begin to be made at that time, which is within the 2005–07 biennium. Note that s. 20.435 (1) (hg), stats., is a sum certain appropriation, limited to the amounts in the schedule, regardless if the contract fees and physician assessments exceed the amounts in the schedule. Section 20.515 (1) (ut), stats., is also sum certain appropriation, from a segregated fund, and under this bill has additional purpose. Are the amounts in the schedule for these appropriations sufficient for the changes effected under the bill, or should they be increased?



8. There appears to be conflict between ss. 20.515 (1) (ut) and 155.05 (2r). Should DETF be authorized to expend moneys for DHFS' performance under s. 153.455 (4)?

Debora A. Kennedy Managing Attorney Phone: (608) 266-0137

E-mail: debora.kennedy@legis.state.wi.us